

UNITED STATES DISTRICT COURT

for the

District of Oregon

Susan K. Swango

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Plaintiff(s)

v.

Civil Action No. 3:17-cv-01338-MO

NATIONSTAR SUB1 LLC; et al.,

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Defendant(s)

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SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) FIDELITY NATIONAL TITLE INSURANCE COMPANY
 c/o Chief Financial Officer
 200 E Gaines Street
 Tallahassee, FL 89134

A lawsuit has been filed against you.

Amended

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Susan K. Swango
 8350 NE Hendricks Road
 Carlton, OR 97111

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: SEP 27 2017



MARY L. MORAN

CLERK OF COURT

Signature of Clerk or Deputy Clerk

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 3:17-cv-01338-MO

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Fidelity NATIONAL Title INS. CO.
 was received by me on *(date)* 10-11-17.

I personally served the summons on the individual at *(place)* _____
 on *(date)* _____; or

I left the summons at the individual's residence or usual place of abode with *(name)* _____
 _____, a person of suitable age and discretion who resides there,
 on *(date)* _____, and mailed a copy to the individual's last known address; or

I served the summons on *(name of individual)* _____, who is
 designated by law to accept service of process on behalf of *(name of organization)* _____
 on *(date)* _____; or

I returned the summons unexecuted because _____; or

Other *(specify)*: FIRST CLASS MAIL AND CERTIFIED MAIL RETURN
 RECEIPT REQUESTED NO. 7016 0750 0000 2261 1985
 PER FRCP 84 AND ORCP 7. SEE ATTACHED

My fees are \$ -0- for travel and \$ -0- for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

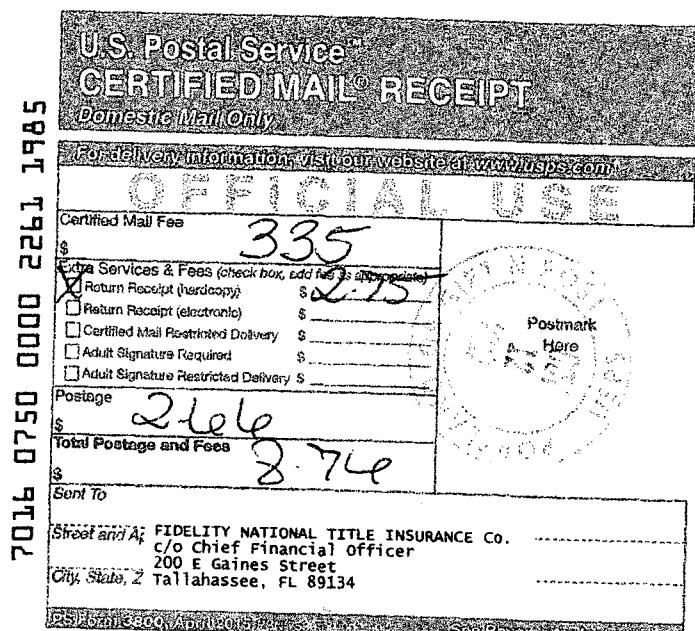
Date: 11-5-17

Thomas B Birch
 Server's signature

Tom Birch
 Printed name and title

 Server's address

Additional information regarding attempted service, etc:



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

FIDELITY NATIONAL TITLE INSURANCE CO.
c/o Chief Financial Officer
200 E Gaines Street
Tallahassee, FL 89134



9590 9402 1512 5362 5877 20

2. Article Number (Transfer from service label)

7016 0750 0000 2261 1985

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

- Priority Mail Express®
- Adult Signature
- Registered Mail™
- Registered Mail Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

